



Application Data Sheet

Application Information

Application number:: 10/828,846
Filing Date:: 04/20/04
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??::
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: PATTERN RECOGNITION METHOD FOR
DIAGNOSIS OF SYSTEMIC AUTOIMMUNE
DISEASES
Attorney Docket Number:: 02558B-063710US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 6
Small Entity?:: No
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type: Inventor
Primary Citizenship Country: US
Status: Full Capacity
Given Name: Steven
Middle Name: R.
Family Name: Binder
Name Suffix:
City of Residence: Berkeley
State or Province of Residence: CA
Country of Residence: US
Street of Mailing Address: 2506 Hawthorne Terrace
City of Mailing Address: Berkeley
State or Province of mailing address: CA
Country of mailing address:
Postal or Zip Code of mailing address: 94708

Applicant Authority Type: Inventor
Primary Citizenship Country: US
Status: Full Capacity
Given Name: John
Middle Name:
Family Name: Glossenger
Name Suffix:
City of Residence: Benicia
State or Province of Residence: CA
Country of Residence: US
Street of Mailing Address: 105 Rankin Way, No. 87
City of Mailing Address: Benicia

State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 94510

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::
This Application Continuation-in-part of 09/691,405 10/17/00

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name:: Bio-Rad Laboratories, Inc.
Street of mailing address:: 1000 Alfred Nobel Drive
City of mailing address:: Hercules
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94947